


CH

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: <div style="border: 1px solid black; padding: 5px; margin: 5px;"> Pierre Dawson 20863-424 Greenville - FCJ P.O. Box 5000 Greenville, IL 62246 </div>		B. Received by (Printed Name) C. Date of Delivery 12-28-07	
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt	

UNITED STATES POSTAL SERVICE


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

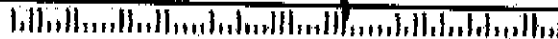
• Sender: Please print your name, address, and ZIP⁴ in this box •

RECEIVED

United States District Court
Clerk's Office
219 South Dearborn St. 20th Floor
Chicago, Ill. 60604

DEC 27 2007
MICHAEL W. DOBBINS
CLERK, U. S. DISTRICT COURT

Att: Docet Sup 07C7031



FILED

07 CV 7031

DEC 27 2007 PH
Dec 27 2007
MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT